DOCUMENT RESUME

ED 322 652 EC 231 837

AUTHOR Reisman, Elaine S.
TITLE A Study of Support Systems and Supervisory Techniques Used in the Training and Employment of People with Moderate Special Needs. Research Report.
PUB DATE 90
NOTE 44p.; For a related document, see EC 231 838.
PUB TYPE Reports - Research/Technical (143) -- Tests/Evaluation Instruments (160)

EDRS PRICE MF01/PC02 Plus Postage.
DESCRIPTORS Adults; Employer Attitudes; Employer Employee Relationship; *Employment Programs; Interviews; *Job Training; *Learning Disabilities; Personnel Management; Questionnaires; *Supervision; *Supervisory Methods; *Supported Employment; Vocational Adjustment

ABSTRACT

The purpose of the study reported in this paper was to identify support systems for supervisors of people with moderate special needs (MSN) in training internships and employment situations. A questionnaire was mailed to 105 cooperating practitioners who had served in previous years as on-site supervisors (ONS) for students in a job training/placement program; of these, 66 useable replies were received for a response rate of 68%. Interviews were also conducted with 27 former ONS and other employers and personnel managers in business and industry. Findings indicated that benefits of such employment programs to employers, MSN employees, and the community are many. However, performance expectations often exceed MSN employee ability, which tends to contribute to difficulties in psychosocial and emotional adjustment of the NSM employee. Training supervisors who can provide specific information and supervisory techniques for working with MSN employees and the availability of such supervisors for ongoing consultation were seen as major sources of support for ONS staff. Appendices include copies of questionnaires and interview forms, lists of interviewees, 12 references, and a bibliography. (PB)

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"A STUDY OF SUPPORT SYSTEMS AND SUPERVISORY TECHNIQUES USED IN THE TRAINING AND EMPLOYMENT OF PEOPLE WITH MODERATE SPECIAL NEEDS"

Research Report

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Spring 1990

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INTRODUCTION

This report, "A Study of Support Systems and Supervisory Techniques Used in the Training and Employment of People with Moderate Special Needs" is the result of a research project I conducted Spring semester 1990 during my sabbatical leave from the Threshold Program at Lesley College, Cambridge, MA.

The purpose of the study was to identify support systems for supervisors of people with moderate special needs in training internships and employment situations. Sources and techniques of support which enable supervisors to work more effectively with trainees and employees were evaluated. Work related issues of the person with moderate special needs and techniques used by supervisors to handle problems were explored. A greater understanding of this population and ways to meet their needs has the potential to provide needed personnel in the labor force as well as to make a contribution to the lives of people who otherwise might not have the opportunity to become independent working citizens.

The Threshold Program is a campus based two year program for learning disabled adults in the low average intellectual range. It strives to prepare this population of young adults for independent living through an academic and vocational curriculum based on a hands-on approach. Students divide their time between specially designed campus based courses and vocational experiences supervised by Threshold faculty members and cooperating personnel in the field placements. Students may choose to prepare for work in early childhood centers or in adult human services in such settings as nursing homes or geriatric day centers. An optional third year transitional program is geared to encourage greater independence as students adjust to paid work experiences and living on their own.

For the past eight years, my reponsibilities as Early Childhood Coordinator of the Threshold Program have included teaching courses in Early Childhood Education, supervising students in their field placements, coordinating contacts and in service workshops for cooperating on-site supervisors. Based on this experience and in consultation with my colleagues, I perceived a need for further clarification of supervisory issues and the development of guidelines which would be helpful in supporting the work of the on-site supervisors with whom we co-operate. It was also deemed probable that employers in business and industry, as well as the human services, could find such guidelines helpful. This project was launched in December 1989 with the hope that greater understanding of working with people with moderate special needs would encourage employers to hire them; and that clarifying techniques which foster better performance would improve job retention for those hired.

RATIONALE FOR STUDY

Our society is becoming more aware of the special needs of some of its members as evidenced in the modifications that have been made in the public domain, i.e. ramps, special toilet facilities, hearing devices in theaters, etc. Programs have been legislated by state and federal law for educational and support services to address the special needs of children. Opportunities to take part more fully take part in all aspects of daily living continue to open up for people with physical, cognitive, social and emotional challenges.

While modifications for the more visible handicaps have been implemented, there is a population of adults with special needs who encounter difficulties in daily living tasks and at the work place which are not so widely recognized. This population, designated as people with moderate special needs (MSN)* receive few services after the age of twenty-one.

*These abbreviations will be used henceforth in this report. They are consistent with those used in the questionnaire. (Appendix 2)

MSN - person or people with moderate special needs (includes those designated learning disabled with low average intellectual capabilities)

GP - general population: all others except MSN or those with clearly identified deficits

ONS - on-site supervisor: person responsible for supervising work of MSN on the job site

TS - training supervisor: professionals who train and maintain contact with the MSN and the ONS; this person could be from within the organization or from an outside source, i.e. MA Rehabilitation counselor, Threshold faculty

WS - work supervisor: employee of the organization who supervises the work of the ONS; i.e. director of an agency or school, company executive, department head

(Reference to the WS is made in the questionnaire, but is not discussed in the findings because too few respondents answered questions in regard to the WS.)

Definition of Moderate Special Needs (MSN)

Typically, MSN, the target population for this study could not be singled out by their physical appearance from others in the general population (GP) . They are a heterogeneous population characterized by low average intelligence, with poor reading and/or math skills, difficulty with verbal and/or written communication, inability to abstract and generalize, and social immaturity. Some other characteristics which occur in this population are short attention span, distractibility, information processing deficits, memory problems, perseveration, and

inappropriate social responses. Any one individual can demonstrate a scatter of abilities and levels of functioning. It is possible for an MSN to have excellent social skills, but be low in cognitive abilities.

The MSN function on a level lower than the GP, but higher than the retarded population. Because their deficits are not so visible, indeed, may be called 'hidden', they are often expected to function at a level higher than their skills would warrant. In large measure this population operates in the mainstream of society, but have cognitive and/or social deficits which may cause problems in daily living and on the job. Their adjustment to the general society and to independent living is problematic for themselves and their families. One important aspect of this adjustment is in the area of employment.

In a position paper which promotes learning disabled employees as human resources, it is estimated that in any large industry or business, anywhere from 10-15% of the employees have learning disabilities. (Macomber 1980) MSN sometimes come to the workplace as part of the general population and function for periods of time until their deficits show up. Then, the manifestation of the problems such as perceptual, social or language processing problems cause them to lose their jobs. Employers may interpret the behaviors as personality quirks rather than understanding the nature of the problems.

Employment Potential of the MSN

Out of a sense of social responsibility as well as self interest, human service agencies, industries and businesses have begun to recognize the contribution that this population can make to their establishments and some are hiring MSN with the knowledge of their special needs. (MA Rehabilitation Commission Survey of Employers March 1989)

Hiring and supervising employees with special needs has some unique aspects. First, employers are not trained to pick up and differentiate the possibility of moderate special needs when a problem occurs with a worker not identified as special needs when hired. Second, employers are unlikely to be aware of how to adjust expectations to fit the specific needs of this population even when they hire them knowing they have special needs. Third, employers are not apt to invest the time or resources to develop requisite supervisory skills to aid the successful adjustment of the MSN to the workplace.

An example from the business management literature suggests that not much attention is directed to the training of supervisors working with the normal range of employees:

> "Another concern is the training and education provided to supervisors. One area often neglected is the training received soon after promotion. A bank would be reluctant to put a new teller on the job without prior training and education. No

> manufacturing company would put a machine operator on the job without thorough preparation in how to operate the equipment. Yet, many organizations feel comfortable asking an employee to switch roles--usually over the weekend, leaving the job on Friday as an operator and showing up on Monday in the new role of supervisor--without any prior training....Too often organizations leave the growth of supervisors to chance, hoping they will eventually acquire the skills to be effective." (Phillips 1985 p.13)

If attention is not being given to training for the role of supervisor for the general population, then there is even a more dramatic concern for employees, who need some special supervisory consideration.

Current State of Research

The need for this study was substantiated by a lack of literature on the subject of supervision of employees with moderate special needs. While there is a body of literature on supervision in the human services and on management in business and industry, there is little directed specifically to the supervisory needs of the MSN population. A literature search of the education data base from 1978-88 and business and industry data base 1971-88 (under the headings of supervision, vocational adjustment, learning disabilities, special needs, and developmental disabilities), turned up only four articles related to the supervision of MSN on the job. One of the articles was a summary of another publication. Others dealt with general labor relations issues, employer attitudes or specifically focused on the mentally retarded population. Further exploration of the periodical literature through February 1990 turned up no further articles directed to supervision of MSN.

Other Reasons for Study Proposal

While training MSN at Threshold to work in the human services, we have discovered some techniques which are particularly germane to supervising this population. These techniques take into account three basic characteristics of the learning disabled adult. First, they are individuals whose self-image is typically low, making them unsure of themselves. Second, while they are limited intellectually, they have the capacity to learn and function effectively and consistently when helped. Third, as with any category of people, adults with learning disabilities are individuals with their own personalities and styles.

Additionally, in our work at Threshold with field work supervisors, we have found a variety of techniques and roles to be effective: interpreting the nature of learning disabilities to the ONS; supporting on-site supervisors as they cope with the unique limits and potential of the student with whom they are working; teaching and modeling supervisory skills; supporting the on-site supervisors as they struggle with their feelings of

success or failure about the student's progress. Thus, validating these techniques for working with MSN and supporting ONS was another incentive for this study.

Hypotheses

In developing this study, I made several assumptions:

1. MSN present problems at the workplace which differ in kind and intensity from those of the GP.
2. Effective supervisory techniques for working with MSN differ from those used with the GP in kind and frequency with which they are needed.
3. On site supervisors of MSN will benefit from information about moderate special needs and techniques for helping MSNs to improve their performance.
4. On site supervisors require affective as well as technical support in their work with MSN.
5. Because of the limited information available specifically geared to the supervision of MSN, the results of this study would be of value to those training, hiring, and/or supervising MSN on the job.

I wanted to investigate the validity of these assumptions with human service professionals who had cooperated with Threshold and to test them out as well with employers in business and industry.

The research analysis was designed to:

1. Improve support for on-site supervisors (ONS);
2. Identify issues on the job which are problematic for the functioning of the MSN;
3. Clarify specific techniques of supervision which enable the MSN to function better on the job.

RESEARCH METHODS

In preparing for this study, a review of supervisory literature in the human services and management was made. The purpose of the review was to compare general supervisory methods with techniques assumed to be more uniquely suited to supervision of the MSN.

Questionnaire

The next step was the design of a questionnaire to collect data in the following categories:

1. Techniques which support the ONS
2. Factors influencing quality of support to the MSN
3. Issues affecting job performance of the MSN and the GP
4. Techniques which ONS might use with either MSN or GP
5. Open ended questions
6. Background information on respondents (Appendix 3)

This questionnaire was pre-tested for form and content by four human service professionals. (Appendix 11)

The questionnaire was mailed to 105 cooperating practitioners who serve or have served over the past three years as ONS for Threshold students in the two year and transition programs. These questionnaires were mailed on January 3, 1990 with a return deadline of January 22, 1990. By January 24, 1990 forty responses were received. On January 25, follow-up letters were sent out. January 31 - February 2 telephone calls were made as a further follow-up. Sixty-seven questionnaires were returned including one that came too late to tally and one that was deemed not usable. Eight were returned with no forwarding address. This represents a return rate of 68% which is quite high for self-completed mailed survey questionnaires.

The questionnaire was designed as a research instrument and the cover letter clearly explained to respondents that it was not an evaluation of the Threshold Program. (Appendix 1)

Data from the completed questionnaires were entered on a computer, verified and processed using SPSS (Statistical Package for the Social Sciences). Responses to each of the questions are reported in Appendices 4 - 8.

The typical respondent was a female, 26-50 years old, with a BA or MA degree in child development or early childhood education, teaching in or administering a day care center. Seventy-five percent of the respondents had more than five years of experience in their field, with a minimum of two years for all respondents. Most had supervised three or more MSN and 75% had supervisory experience with the GP. (Appendix 9)

Interview

A second part of the research was conducted as open ended interviews with people who train and hire MSN and other people with special needs. (Appendix 10) None of those interviewed received the questionnaire. These interviews included former ONS of Threshold students or gradates, as well as employers and personnel managers in business and industry, and professionals in agencies or training programs geared to serve people with special needs.

People who were interviewed were told the purpose of the research, namely to learn about the employment performance of MSN and supervisory experiences with that population. Since many of the people with special needs with whom the interviewees worked, fell into categories other than MSN, I sought to get as much information as possible about the respondent's total experience. It soon became apparent that there was a minimal number of MSN (as defined in this study) involved. Most of the other employees had more visible handicaps.

After the interviewees shared their experiences, I probed further for specifics regarding work with MSN and support for ONS within their companies. Using the two open ended questions from the questionnaire (Appendix 3) yielded helpful responses. In some instances I also visited special needs employees at their

work sites. Results of the interviews and visits are included in the findings section of this report, mostly as examples which support the statistical information from the questionnaire. A listing of interviews is included in Appendix 10.

FINDINGS

Interpretation of the data generated by the questionnaire and the open ended interviews should be read with the following word of caution. Each MSN, as with any other human being, is a completely different individual demonstrating all, some, or few of the issues or problems researched. Several respondents who had experience with more than one MSN said it was hard to fill out the questionnaire because of the variation from person to person. Readers of this report are reminded to consider the responses as a whole for the purpose of seeing trends, recognizing that there are substantial individual variations.

The findings will be discussed under the following headings:

1. Positive Aspects of Job Performance of the MSN
2. Problematic Issues for the MSN on the Job
3. Expectations of the MSN at Work
4. Techniques for Supervision of MSN on the Job
5. Sources of Support for the ONS
6. Techniques used by the Training Supervisor (TS) to support the ONS
7. Factors Which Affect the Support ONS Gives to the MSN

Positive Aspects of Job Performance of the MSN:

In keeping with the basic supervisory principle of pointing out positives to the MSN before discussing negatives, it is important to point out findings from the research which suggest positive qualities about MSN as employees. Responses to the questionnaire and comments from the interviews clearly indicate that people with moderate special needs are dependable, long term employees who can be counted on to show up regularly and on time. Indeed several employers emphasized longevity on the job, which is cost effective for the company; loyalty to the organization; and pride in doing a good job, as reasons why they continue to hire people with special needs.

Absence and tardiness from work were among the lowest ranking issues on the questionniare for the MSN, ranking 23 and 24 respectively; whereas for people in the general population tardiness was ranked #5 and was much more frequently an issue than for the MSN. (Appendix 4) In an unpublished study by Suzanne Posthill, Coordinator of the Transition Program at Threshold, employers of Threshold graduates were asked to rate their employees on a variety of qualities. These employers gave the highest ratings to punctuality and attendance. (Posthill 1989)

An unexpected positive finding was the greater capacity of MSN to accept criticism on the job as compared to other people. (Appendix 4) The general assumption about the MSN is that they are quite self conscious and react to criticism as a personal attack. However, in the study, the inability to accept criticism was ranked by the supervisors as the #1 issue for the GP but #11 for the MSN. Most probably the explanation for this finding is that the MSN population with whom respondents worked were primarily students or graduates of the Threshold Program. One of the skills Threshold emphasizes with its students is how to take constructive criticism. Other possible explanations are:

1. MSN have been subjected to more criticism and redirection all their lives than the GP and have become more accustomed to dealing with it.

2. Because MSN have low self esteem and insecurity about their role, they perceive themselves as needing redirection

3. The supervisors, aware of the sensitivities of the MSN, offer feedback in ways that are easier for the MSN to hear.

Being open to criticism is a basic element in retaining employment, particularly with people like MSN who are viewed by potential employers as a risk population. That the MSN seems receptive to feedback from a supervisor and is willing to try new ways, are important factors for encouraging employment of MSN.

All people who were interviewed supported the findings in regard to attendance and punctuality. Many of them also commented on the eagerness to learn and perform well which most of their special needs employees demonstrated. In a study conducted by Hoffman et al, employed learning disabled adults reported liking their jobs despite their limitations. The LD adults reported "making special efforts in order to do their jobs well." (Hoffman et al 1987 p.46) Many interviewees also reported that MSN tend to do what they are told without question. Most MSN receive criticism without outward reaction when they have done something wrong. Several supervisors said that they tend to be more gentle and patient when giving redirection to the special needs employee.

Another side benefit to the company, as reported by several employers, was that the presence of the special needs employee contributed to the overall atmosphere of the work place. Their presence helped co-workers to learn more patience for each other and to develop more consideration for everyone concerned.

A survey of employers conducted by the MA Rehabilitation Commission reported that hiring persons with disabilities had the following benefits:

1. A company benefits from having good employees who are dependable, highly motivated, loyal, reliable, and remain on the job.

2. Hiring persons with disabilities enriches a company's culture by diversifying the staff. Morale is improved because coworkers feel good that they are helping others, managers feel competent, and it gives a positive message to the larger work force.

3. The capacity to hire persons with disabilities gives companies an edge in a labor-short economy. (MA Rehabilitation Commission March 1989 p.8)

Problematic Issues for the MSN on the Job

Respondents to the questionnaire identified several behavioral issues as occurring much more frequently with MSN than with GP. (Appendix 4) The five most problematic which emerge in the data are:

-insecurity about their roles
-low self-esteem
-memory problems
-distractibility
-inability to transfer learning (Appendix 4)

MSN can learn coping skills, but these five manifestations of disability are less modifiable in the work situation than managing such job responsibilities as attendance and punctuality which, as discussed, were very low on the list of MSN problems.

If, remembering what to do is a problem, paying attention is difficult, and dealing with a new experience is frustrating, it stands to reason that the MSN would generally feel insecure and not have much self esteem. Throughout their lives MSN are confronted with situations which are frustrating and make them feel inadequate because the deficits cited hinder their functioning more satisfactorily. It is not surprising that insecurity about their role and low self esteem show up high on the list of work related problems for the MSN who contend with memory problems, distractibility, and the inability to transfer learning from one situation to another.

Two other issues which are more frequently problems for MSN than for GP are: "inability to follow directions" and "reluctance to ask questions." (Appendix 4) Inability to follow directions might be due to perceptual deficits which impair the MSN's understanding, even though s/he has heard the words. Thus, s/he cannot follow through because the information has become scrambled in the process of trying to put it into action. Sometimes this is seen as a memory problem rather than a processing one.

On seeking to understand the dynamics of these two issues, cited above it becomes clear that they are interrelated and feed on each other. MSN have difficulty following directions, yet, they are reluctant to ask for help. When asked about this

pattern, the usual response of the MSN is "I don't want to sound stupid." (Weiss 1985 p.4) Thus, their low self image gets in the way of seeking the help which might enable them to perform better.

Some of these problem areas were further corroborated in a study by Hoffman et al which surveyed:

381 LD adults eligible for vocational rehabilitation
948 providers of service to LD persons
212 advocates or consumers of services for LD persons (i.e.parents)

All three groups identified memory problems as the most significant cognitive processing problem. Service providers viewed "not following directions" as the major problem in securing and keeping a job. This reflected difficulty following directions in filling out job applications as well as fulfilling job expectations. Major barriers to job success for the learning disabled adults were problems presented because of low self concept. The authors suggest that these adults need to have a better understanding of their needs and to accept themselves so as to develop a more positive self concept. (Hoffman et al 1987)

Although lower in rank and percentage of occurrence, there are two other behavioral issues which need to be acknowledged because of the relatively high disparity between the MSN and GP. The most glaring difference reported in the questionnaire is "the repetition of behaviors and verbalizations" which was noted five and a half times more frequently for the MSN. The other characteristic which occurred twice as frequently was "impulsivity". (Appendix 4) The following is an example of how perseverative behavior coupled with impulsivity can become an irritant on the job:

An MSN was having trouble at work because he repeatedly interrupted the supervisor to remind him of information the MSN had already communicated several times before, i.e., he had a doctor's appointment the next day and would have to leave work early. The MSN would then also repeat all the reasons why he had to have the appointment at that time.

Similar behavior had occurred several times before. This time the supervisor felt that he could no longer tolerate being interrupted. That week in their supervisory conference, the supervisor explained to the MSN the inappropriateness of repeating the same communication over and over again. He especially pointed out the impulsiveness of the behavior in that the MSN frequently interrupted him. They agreed that whenever the MSN was acting impulsively or repeating himself, the supervisor would point it out immediately, trying not to embarrass the MSN in front of other people.

Another perspective on the issue of perseveration is that MSN sometimes can be valuable employees in tasks that require repetition. Whereas some of these tasks could become tedious and the employee lose interest, some employers who were interviewed pointed out that they could depend on the committment of the MSN to the job.

That impulsivity is a problem for the learning disabled adult is supported by the study conducted by Hoffman et al. All three groups surveyed identified the issue of talking or acting without thinking as a major problem for the learning disabled adult on the job. (Hoffman et al 1987 p. 48) Impulsivity was also reported as a problem by several employers interviewed. Besides being annoying to others, it can distract the MSN as well as co-workers from attention to the job.

Other issues surveyed in the study which impact on job performance are related to judgment about health and safety for the MSN or the children or clients with whom they work. Both for themselves and for others, MSN were rated on the questionnaire as twice as likely to use poor judgment in regard to health and safety. In human service jobs, this could be a major detriment as the employee has the responsiblity to look out for the welfare of the children or the clients. On the job safety was discussed with several of the interviewees from business and industry who felt that their special needs employees could be trained to work safely; however, these jobs were more routine than dealing with the inconsistencies of human behavior and did not require as much judgment on the part of the employee.

Expectations of the MSN at Work

The importance of these findings is that, although the same problems occur in the general population, the issues are significantly more prevalent for the MSN. Because the MSN outwardly appear to be like anyone else of their age and are known to deny their disabilities, or at least hope that they can escape notice, their deficits are not always readily apparent. For this reason, others have the tendency to expect more from the MSN than their capabilities warrant. Indeed, most of the employers and personnel managers who were interviewed, spontaneously commented that adjustment and retention problems for the MSN, are likely to be more pronounced than for other handicapped populations. They attribute this to the fact that MSN appear adequate and do not admit to their needs, while limitations of other handicapped individuals are more obvious.

The findings of a study by Minskoff et al "indicate that the employers seemed to express more positive attitudes toward hiring and making special allowances for the handicapped in general than for the learning disabled in particular.... Employers may feel that they can understand handicaps that they can see, whereas they cannot understand cognitive handicaps, such as LD, which are not readily apparent." (Minskoff et al 1987 p. 56)

In discussing techniques selected by the supervisors in this study, the issue of expectations shows up dramatically. "Flexible expectations" was the second most prevalent technique used by respondents working with the MSN. "Modifying assigned tasks" was rated with six times more frequency of use for the MSN than for the GP. (Appendix 5) In the open ended responses, the need to lower expectations and to be more flexible in working with the MSN than they had initially anticipated, was mentioned by many respondents. (Appendix 8)

The reality that the MSN population requires different expectations from others raises practical problems for employment possibilities, both in the competitive process of hiring and in the actual work situation. Today, many companies have affirmative action policies which support hiring people with special needs. These decisions are usually made by the top leadership of the organization. In practice, however, the hiring is often determined by someone lower in the hierarchy such as the direct supervisor of a department of the organization. That person may indeed agree with the policy of the company to hire people with special needs, but, when that department head has to make a choice between a candidate with special needs and other candidates, s/he frequently chooses the latter. The rationale is that the other candidate has better qualifications, which often is true. In four of the interviews with personnel managers responsible for hiring, the disparity between intent and action was discussed. Not surprisingly, where action reflected intent, the person involved had personal experience with an individual with MSN or other special need within his/her own family which made the commitment much stronger. Some reasons why hiring might not occur are:

1. Concern for the image of the department in relation to productivity
2. Although not openly stated, the manager's discomfort with limitations of another person
3. The manager doesn't want the bother or the challenge of making accommodations, even though, in principle, s/he thinks it is a good idea to hire people with special needs

In the work situation, the response of fellow workers is also of concern. Co-workers are sometimes resentful when people are hired for a comparable job and are not able to perform all the duties of the job at the same rate as others, particularly when they look able.

An example of this in the human service field occurs when the MSN may have the skills of relating with clients, but is unable to write the necessary reports. The director of the agency may be willing to figure out other ways for the reports to be done, but the reality is that the co-workers are resentful that the MSN is not fulfilling all of the job requirements. Although the director is ready to be

flexible on expectations, other factors constrain the consideration. This is especially an issue where the organization is unionized.

Techniques for Supervision of the MSN on the Job

In addition to the two techniques mentioned earlier, "flexible expectations" and "modifying assigned tasks", others used by supervisors more frequently with MSN than with GP are:

-give immediate feedback on job performance
-encourage them to ask questions and otherwise advocate for themselves
-give step by step instructions
-provide concrete demonstration of tasks
-remind verbally to do or complete a task
-clarify their role as a service provider rather than a service receiver
-use checklist to follow through on tasks (Appendix 5)

These findings were confirmed by the responses to open ended Question A which asked in what ways the ONS does things differently with the MSN than with the GP. Many respondents said that the MSN need much more feedback and specific instruction than do the GP. (Appendix 8)

The following example illustrates the desire of an MSN to be helped by immediate feedback and direct response:

> An employee rambled on and on in conversations with other staff and the ONS. This was irritating enough so that her job was in jeopardy, but the ONS did not know what to do about it. The training coach from the referring agency was consulted. On the next follow up visit, the training coach discussed the issue with the MSN who confirmed that she really wanted to do well. Her comment was, "They should tell me when I'm talking too much. I'm going to my ONS and tell her that whenever I am rambling, she should immediately tell me to 'shut up'."

Clearly the supervisor needs to recognize that the behaviors characteristic of MSN require patience, but when brought to the attention of the MSN, redirection is welcome. Confirmation of this was discussed earlier in regard to the ability of the MSN to accept constructive criticism. Bringing the behavior to his/her attention at the moment at which it occurs can help the MSN to understand when and how to change. Although it is sometimes difficult for supervisors to be as direct as requested in the example, the MSN can benefit from honest, immediate, specific feedback given in a kind way. This works best when the ONS has built a trusting relationship with the supervisee.

Techniques for helping the MSN to feel welcome and important as part of the working team, as those used with any person in a new situation, aid job adjustment. Clarifying the job

expectations and tasks verbally and in writing often enables a person to be more relaxed and receptive to learning. The difference for the MSN in this respect is that the welcoming techniques and explanations need repetition and demonstration at more frequent intervals. That it takes more time to work with MSN and requires more patience was confirmed in responses from CNS to Question A. (Appendix 8)

Both memory problems and difficulty in transferring learning are characteristics of MSN that call upon the patience of the CNS. MSN need repeated instruction in new situations even though they have been previously taught the required skill. To illustrate the point:

> A trainee was learning how to diaper a particular child and after several days of handling the situation well, the supervisor decided that the MSN trainee was ready to add the responsibility of another child. On encountering a slightly less compliant child who kept grabbing at her hand as she tried to diaper, the trainee became frustrated. She couldn't complete the task, even though in the original training demonstration with the first child the supervisor had gone over a variety of usable techniques. It was necessary for the supervisor to repeat the instruction and demonstration for diapering the new child.

An enigma in teaching specific step-by-step tasks in a concrete way and being clear about expectations, is that because of the inflexibility of the MSN, all that good training could backfire. Once told something, MSN adhere rigidly to that pattern unless given sanction by an authority (supervisor) to make changes. A case in point:

> The rule in a particular day care center is that children take their shoes off before getting on their cots for nap time. One child was making a fuss about taking off his shoes and the MSN was helping to calm him down. Finally, he relaxed, laid down and seemed ready to fall asleep when the MSN trainee realized that the child still had his shoes on. She then insisted that he take his shoes off, whereupon the child became upset again. Even though the supervisor had instructed the trainee that calming the child down was the important issue, the supervisor had not specifically said that it was acceptable for him not to take off the shoes this time. So, the MSN, being rigid, not having good judgment skills, and insecure about her role, adhered strictly to the rule.

This example also illustrates the difficulty in transferring learning. In that classroom, the teacher noted that on several occasions she had pointed out to her trainee where rules could be bent. The trainee could not apply the principle when a different problem occurred. The reason for this may, in part, be explained

by the fact that MSN are so inhibited by insecurity about their role, that when they are given responsibilities, they are afraid to make a judgment which might veer from the rule they have learned. Adhering rigidly to rules affords them a source of security.

In the above example, even if the MSN were to question the rule in that instance, she probably would not have said anything. Because MSN are generally self-depreciating, they are afraid to ask questions or otherwise advocate for themselves. Even though CNS encourage MSN to ask questions and express their needs, they often do not do this because of feeling insecure about their role in the situation and worrying about appearing "stupid".

Another technique which was used more often with the MSN than with the GP was clarifying their role as a provider of service rather than a receiver of service. This is particularly germane in the early childhood or adult human service setting where employees are on call constantly to minister to others. The need to emphasize their role as a provider reflects the immaturity of MSN and their tremendous need for personal attention and reassurance.

In our supervisory work at Threshold, the use of a check list has been very effective in helping MSN to assume some independence in following through on work tasks. Thus, this item was included in the questionnaire. Check lists were used more than twice as frequently with MSN as with GP. However, it was the least frequently used of all the techniques listed and by a relatively small percentage of respondents. Since the respondents indicated that they frequently need to remind MSN to do or complete tasks, it would seem that the check list might be a way to help the MSN to function with greater autonomy.

Regular supervisory sessions ranked highest as a technique used with the MSN. This result most likely is a reflection of the requirement of the Threshold program that regular supervisory meetings take place between the supervisors and the trainees or employees. That this is an excellent technique is not questioned, but the frequency of its use may be skewed in this study because of the requirement. Biller supports the idea of pre-scheduled meeting times as a way of providing a non-threatening atmosphere which can be used for reinforcement and improvement of behavior and work skills. (Biller 1988 p.87)

Sources of Support for the CNS

The findings indicate a number of special supervisory techniques which can be used in working with MSN. Even with knowledge about the special needs of the MSN and strategies to ameliorate problems, issues may persist which do not respond to the best efforts of the CNS. To whom can the CNS turn for support? More than 70% of the respondents to the questionnaire indicated that the training supervisor (TS) was the person who supports the ongoing work of the CNS with the MSN. This finding may be skewed, because respondents were directly involved with

the supervision of MSN through the Threshold Program. TS from the program are in regular contact with the cooperating supervisors. However, that the role of the TS is a crucial one is confirmed by other data from the study.

Each of the people interviewed reported that support for the ONS in their work with special needs employees came from a TS. Several different models came to light in the discussions. In two situations investigated, the trainers remain full time at the work place to teach job skills to new clients referred for service. Even though their official job description does not specify the continuation of service after employment takes place, the trainers remain as a source of support to the employees and their department heads because of their ready availability and trust in the trainer's supervisory knowledge. In other situations, TS from the referring agency come to the work site to train the special needs person for the job, gradually phasing out as the trainee shows readiness for employment. Once employment takes place, the training coach or counselor (TS) makes periodic follow-up visits and is available for crisis intervention. Two affirmative action officers interviewed for this study, conduct sensitivity training sessions related to all aspects of minority hiring for department heads and other employees in their companies and are also available as a resource when issues occur. Every person interviewed expressed the opinion that successful employment for special needs people requires the support of someone who fulfills the same role as a TS.

In the survey of employers conducted by the Massachusetts Rehabilitation Commission, employers expressed the opinion that it was beneficial to work with a local adult service provider. A quote from that study emphasizes the value of support personnel, "The key to the whole thing is the job coach; the coach makes it work." (MA Rehabiliation Commission March 1989 p.10)

To further clarify the issue of services especially for MSN and support for the ONS, it is important to reemphasize that in the field interviews, the special needs population referred to included individuals with visual, hearing or physical problems, with mental retardation and/or people recovering from emotional problems, in addition to the MSN. A small percentage of the trainees and employees referred to in the interviews fit the category, MSN, as identified in this study. Emphasis is placed on this point because, programs and literature were found in the course of this research which focus specifically on the needs of the employees with other handicapping conditions but few comparable resources were discovered for the MSN. For example, Supported Employment for the Retarded, a program administered by the Massachusetts Rehabilitation Commission offers on-site training and supervisory support to the mentally retarded, but there is an eligibility requirement in regard to IQ which excludes service to the majority of MSN who test higher. The lack of services for adults with learning disabilities is noted throughout the literature. (Gerber 1981, Gray 1981, Hoffman et al 1987, Biller 1988, Haring 1990)

Eighty-two agencies serving 6734 clients responded to a survey of service providers in MA conducted under the aegis of the MA Rehabilitation Commission. The primary diagnosis for most of the clients was Mental Retardation or some other more visable handicap.(MA Rehabilitation Commission Dec. 1988)

Memorandum 1M-37 dated July 14, 1981 from the Rehabilitative Service Administration includes a section on page 4 which determines the eligibility for rehabilitative services under the following learning disabilities definition:

> Learning Disability: Individuals who have a disorder in one or more of the psychological processes involved in understanding, perceiving, or expressing language or concepts (spoken or written)--a disorder which may manifest itself in problems related to listening, thinking, speaking, reading, writing, spelling or doing mathematical calculations--would be eligible to receive vocational rehabilitation services if they satisfy the following criteria:
>
> a. Their psychological processing disorder is diagnosed by a licensed physician and/or a licensed or certified psychologist who is skilled in the diagnosis and treatment of such disorders; and
> b. Their disorder results in a substantial handicap to employment; and
> c. There is a reasonable expectation that vocational rehabilitation services may benefit the individual in terms of employability.

In 1986 the Rehabilitation Amendments established a new definition of "severe handicap". People with a physical or mental disability that seriously limits one or more functional capacities (mobility, communication, self-care, self direction, interpersonal skills, work tolerance, or work skills) in terms of employability and who require multiple vocational rehabilitation services over an extended period of time were eligible for vocational rehabilitation services. To date, most rehabilitation agencies have had difficulty applying the above severity criteria to clients with LD. (Biller 1988 p. 76) These requirements make it difficult for MSN to receive vocational services because it is hard to determine a specific medical or psychological diagnosis for the MSN. In addition, they are denied service because they are not considered to have severe enough problems. As a number of interviewees commented, "They fall through the cracks."

Sometimes, an MSN will seek and obtain employment on his/her own, rather than being referred. One explanation is that because of low self esteem, they are embarassed to identify themselves as having special needs. (Minskoff et al 1987) Another explanation is that MSN operate out of an unrealistic concept of their own abilities. Inevitably, however their needs show up and cause problems on the job. One way that the Threshold program has

confronted this issue is to offer a course called Understanding Learning Disabilities. Course material includes general information about LD, a personal learning profile for each student, and compensatory strategies for handling personal deficits in daily life and at work. Students are encouraged to be honest about their strengths and weaknesses when they apply for jobs. Feedback from employers indicates that more appropriate job placement is possible because of information about the MSN's abilities and needs.

Several interviewees commented on the MSN's denial of problems. An example from a large corporation illustrates this point:

> An employee was eligible for a higher level job in another department. He was eager for the new postion, but frightened by his inability to read. On his own, he sought help to learn to read from the TS assigned for special needs employees, requesting that this information not be shared. He was afraid to let his department head know of his deficit or to use the services provided by the company, which included literacy classes, for fear he would not get the promotion.

This example substantiates Macomber's thesis cited earlier that despite the fact that some MSN are not up front about their deficits, the job demands will in time reveal them. (Macomber 1980) When the person with special needs is identified, the possibility is introduced that expectations of his/her performance will be more realistic and that special support services might be made available. The data confirm that when support services are available, generally from outside referring agencies, this does aid in retaining the special needs person on the job.

Techniques used by the TS to support the ONS

Data from the questionnaires and from the interviews confirm the importance to the ONS of the supportive relationship with the TS. Knowledge that the TS shares about moderate special needs and concrete ways to help the MSN to function better are considered very valuable. (Appendix 6 and 7) The questionnaire option "meets jointly with you and the MSN" was rated the most helpful supervisory technique used by TS. (Appendix 6) In the three way meetings, support is given to the ONS in solving issues that arise with the MSN on the job. The second and third highest ranked supervisory techniques provided by the TS are "establishes a supportive relationship" and "confers with you alone" (Appendix 6) This statistical evidence was backed up by many of the responses to the question "What has been the most helpful to you in you efforts to train or supervise the MSN?" Half of the respondents commented that when they felt frustrated and needed

assistance, it was the support of the TS which helped them through trying circumstances. Some very specifically mentioned the individual meetings with the ONS and the joint meetings with the MSN. (Appendix 8)

Some ONS are uncomfortable about being direct with the MSN about his or her shortcomings. Because MSN are concrete learners and often miss the subtleties of communication, it is important for the ONS to learn to be direct. Several respondents stated that being present when the TS confronts the MSN in the three way meetings encourages them to be more assertive in handling issues with the MSN. The TS must strike a delicate balance in assessing how and when to intervene in issues which arise. It is important for the ONS and TS to be in accord about the best techniques for helping the MNS in order that neither one undermines the authority of the other.

In this regard sometimes the TS also has to interpret for the MSN, who are not usually articulate about their needs. Sometimes too much is being asked of the MSN, and sometimes abilities are not being tapped because the ONS is afraid to overtax the MSN. In either case, the role of the TS is important in working toward successful employment for MSN.

Three other techniques used by TS which offer the ONS direction in their work with MSN warrant comment:

-Clarifies your role in relation to MSN
-Identifies the special needs of the MSN
-Explains strengths and weaknesses of MSN (Appendix 6)

ONS found these techniques very helpful in their work with the MSN. Clarity of the expectations, both for the supervisor and the MSN, obviously makes a difference. In addition the information that the TS shares about MSN in general and about the specific person with whom the ONS is working, aids the ONS in coping with daily problems. Responses to Question B on the questionnaire, in regard to what was most helpful in working with MSN, supported this finding by comments such as "Knowing the nature of the MSN's special needs", "Being clear about what was expected of me as an ONS." (Appendix 8)

Factors Which Affect The Support ONS Gives To The MSN

In addition to the support from the TS, there are other influences which affect the quality of supervision that the ONS gives to the MSN. ONS reported two categories of factors which enable them to be most supportive of the MSN:

1. Internal factors: the ONS' personal commitment to work with MSN and confidence in his/her own supervisory abilities

2. External factors: the specific information provided by the TS.

Included in the first category of internal or personal factors were:

-My belief in the overall concept of training and employing the MSN
-My confidence in my overall supervisory ability
-My feeling that I am basically successful in helping the MSN work to the best of his/her ability (Appendix 7)

Included in the externally provided factors were:

-Being given concrete ways to help MSN to compensate for areas of weakness
-Understanding the special needs of MSN (Appendix 7)

The high rankings of both sets of factors indicate that supervisors will be most effective with MSN if they have a combination of personal commitment and inclination to work with the MSN, plus guidance and information from the consulting TS.

The above discussion suggests that good intentions and positive feelings of the ONS need to be backed-up with specific information about the needs of the MSN and how to meet them. Does not this parallel the techniques used to help the MSN to function? The research finds that MSN need consideration and support in the form of more flexible expectations, immediate feedback, etc, along with very specific instruction.

We know that in general people function better and with greater security when expectations are clearly defined and offered with a bit of TLC. Initially this may appear as a truism, but it is important to highlight in the context of designing policy and supervisory techniques for working with the MSN population.

SUMMARY

Training, hiring, and/or supervising a person with moderate special needs calls for a major commitment from supervisors, both in terms of time for training and patience on the job. However, the specific findings of this study and the implications that can be drawn from them are that there are benefits for the MSN, the employer, the other workers, and the community at large.

For the MSN, the job provides:

-meaning to life
-greater independence
-social outlets
-more self-esteem

For the employer, and other employees, the benefits are:

-a source of dependable and loyal employees which is cost effective

-an enriched work environment because of a diverse work force
-the opportunity for other employees to learn patience, acceptance and interactional skills
-enhanced employee morale which comes from being part of a company or an organization that demonstrates a sense of social responsibility in hiring people with special needs

For the community at large, the benefits are:

-individuals who would otherwise be more dependent on community services are able to attain a measure of independence
-awareness by the general population of the capacity of people with special needs to be productive members of society.

The specific findings of this study about MSN as employees are:

1. MSNs are loyal, dependable employees with good records of consistent attendance and promptness. They are eager to do well and respond to supervision.

2. Because the special needs of MSNs are often not immediately evident, performance expectations by employers often exceed the MSN's abilities, causing difficulty on the job.

3. Limited attention has been paid to this population. Because their needs are not readily visible, MSN often "fall through the cracks" with regard to receiving needed support services.

4. Major problems for the MSN on the job, as compared to the general population, are insecurity about their role, low self esteem, memory problems, distractibility, inability to transfer learning, difficulty following directions, repetition of verbalizations and behaviors, and impulsivity.

5. MSN do best when clear, specific, step by step instructions are demonstrated to them. Other supervisory techniques which are helpful to MSN's include: flexible expectations, modifying assigned tasks, and immediate feedback. Regular supervisory conferences are also important.

6. MSNs in the human services need help clarifying their role as service providers rather than service receivers.

The specific findings about support for supervisors of MSN

1. ONS benefit from the support of a training coach or supervisor (TS) who can provide specific information and supervisory techniques for working with MSN. Joint meetings with the training supervisor(TS) and the MSN, and the availability of the TS for on going consultation, support the ONS in their work with the MSN.

2. ONS can be more supportive to MSN when they have a personal commitment to the principle of training and hiring people with limitations. Confidence in their own supervisory skills also makes ONS more supportive.

3. The match between the expectations of the job, the commitment of the ONS, and the needs of the MSN are crucial for the employment success of the MSN. Since it takes more patience and time to integrate and retain an employee with MSN, the ONS is a critical link to satisfactory performance and retention of the MSN on the job.

RECOMMENDATIONS TO ENHANCE JOB OPPORTUNITIES FOR MSN

Recommendations which are implied from the findings of this study:

1. Further exploration is needed to identify appropriate occupations in the human service professions and in the corporate world for the employment of the MSN. This study has established that with some modification of job requirements, specialized training, and supervision, the MSNs can be a valuable pool of employees.

2. Human resource, personnel and/or training departments in the business and corporate worlds have the potential to service employees with MSN and their supervisors. Currently these departments are called in when other personal problems such as drug abuse, alcoholism, etc. interfere with job performance, but, for the most part, they are not as yet alert to the specific needs of the MSN. In the course of this research, there were two examples of companies in which the human resource departments diagnosed skill deficits of employees and developed training programs tailored to meet the learning styles of these employees. Social skills issues affecting job performance were also addressed in the training programs. The diagnostics revealed that some of these employees fit the description of the MSN population. It is reasonable to expect that understanding the needs of MSN and techniques to work with them, might be included in the training of personnel and human resource professionals so that service to the MSN could be more widespread.

3. Need for more vocational and career planning services for MSN is indicated by the findings of this study. A service similar to Supported Employment for the Retarded, could be modified to meet the needs of the MSN.

4. The development of a guidebook of supervisory techniques for working with the MSN was suggested by many of the people interviewed for this study. Such a guidebook is currently being prepared, using the findings from this study.

5. The development of public programs to interpret the needs of MSN could promote more understanding of their potential to contribute in the workplace and to society in general. Hopefully this understanding would lead to more services, making possible appropriate opportunities to use the abilities that MSN have to become contributing citizens of our communities.

Lesley College

29 Everett Street, Cambridge, Massachusetts 02138-2790

THRESHOLD
(617) 491-3739

2 January 1990

Dear

I am writing to request your cooperation in a study I am conducting of supervision of students and employees with moderate special needs (MSN). The goal is to develop guidelines for supervisors which will enhance employability of people with MSN and contribute to effective job performance.

This study is concerned with general principles of supervising the MSN population. All experiences which you have had with this population are relevant. We are definitely not concerned with evaluating the effectiveness of individual programs or the workers from them.

Little has been written about the issues of preparing and retaining the MSN population in employment. I know you share with me the conviction that the more we know about this matter the better able we will be to establish a work situation that is most beneficial to both workers and supervisors.

This questionnaire is being sent to a small group of people who have worked with, or are now working with, the MSN population. Because of the unique character of our sample, it is especially important to obtain completed questionnaires from as many respondents as possible.

All responses will be treated confidentially. Data will be reported for the study sample as a whole, and not for individual cases. The identification number on the questionnaire will be used only to follow up on returns.

After completing the questionnaire, please put it in the stamped self-addressed envelope. Mail it as soon as possible, and n later than January 22. All respondents will be invited to a meeting at Lesley College during academic year 1990-91, where findings of the study will be presented.

Thank you for your cooperation,

Sincerely,

Elaine S. Reisman

Elaine S. Reisman
Assistant Professor
Early Childhood Coordinator
Threshold Program, Lesley College

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A STUDY OF SUPERVISORY TECHNIQUES USED IN THE TRAINING AND EMPLOYMENT OF PEOPLE WITH MODERATE SPECIAL NEEDS

Elaine S. Reisman
Assistant Professor
Early Childhood Co-ordinator
Threshold Program, Lesley College

January, 1990

This study is concerned with the supervision requirements of personnel who have the responsibility for supervising the training and/or employment of people with moderate special needs. The purpose is to gain a better understanding of the support systems which interact and affect the performance of this population in the work place.

The following terms will be used in this questionnaire:

Training Supervisor (TS): person outside of the organization who maintains contact to support the training or employment experience (i.e. Threshold advisor, Mass Rehab counselor)

Work Supervisor (WS): person within the organization who supervises the work of the on-site supervisor (i.e. agency director, department head)

On-site Supervisor (ONS): person directly responsible for supervising the work of the trainee or employee

Trainee/employee with moderate special needs (MSN): person with moderate special needs who is assigned to the site by a training program, or a person who is employed by the organization

Trainee/employee from the general population (GP): person from the general population who is assigned to the site by a training program or a person who is employed by the organization

PLEASE NOTE:

For purposes of this study, a person with moderate special needs is considered to have most of the following characteristics:

...potential to live independently and maintain employment
...deficits in the basic skills (reading, writing, math)
...problems with abstract reasoning, memory, following directions, judgments, social skills (one or more of the above)
...discrepancy between verbal skills and written or performance skills
...an IQ in the 75 - 95 range
...generally normal physical appearance and abilities

SECTION I. TECHNIQUES WHICH SUPPORT THE ON-SITE SUPERVISOR (ONS)

A. Who supports your on-going work with the trainee/employee who has moderate special needs (MSN)? Check the one you confer with the most:

Training Supervisor (TS) _____
Work Supervisor (WS) _____
Other (specify) _____

B. The following is a list of techniques that a supervisor might provide to you, the ONS. Identify by number (1,2,3,4) for <u>both</u> TS and WS how helpful each technique has been in your work with the MSN.

1 = very helpful
2 = somewhat helpful
3 = not helpful
4 = does not apply

	TS	WS
a. Clarifies your role in relation to the MSN		
b. Identifies the special needs of the MSN		
c. Explains strengths and weaknesses of MSN		
d. Assigns tasks for the MSN to do		
e. Suggests specific techniques on how to help the MSN (i.e. making check lists)		
f. Meets with you and the MSN for joint discussions		
g. Helps establish goals for vocational growth of MSN, both long and short term		
h. Demonstrates ways of problem solving work related issues with the MSN (in your presence)		
i. Confers with you alone about the MSN		
j. Offers in-service workshops relevant to the MSN population		
k. Establishes a supportive relationship with you		
l. Expresses empathy for problems related to working with the particular MSN		
m. Gives acknowledgment and encouragement for the job you are doing with the MSN		
n. Other (specify)		

SECTION II. FACTORS INFLUENCING QUALITY OF SUPPORT TO MSN

Please rate (1,2,3,4,5,0) how much the following factors enable you be supportive to the MSN:

1 = makes me much more supportive
2 = makes me somewhat more supportive
3 = does not affect me
4 = makes me somewhat less supportive
5 = makes me much less supportive
0 = does not apply

a. My confidence in my overall supervisory ability _____

b. My feeling that I am basically successful in helping MSN work to the best of his/her ability _____

c. Good quality of performance by MSN _____

d. Recognition of my work with the MSN by TS or WS _____

e. Advocacy for the needs of the MSN by TS or WS _____

f. Having supervisor model supportive behavior onsite with the MSN _____

g. My belief in the overall concept of training and employing the MSN _____

h. Understanding the special needs of MSN _____

i. Being given concrete ways to help MSN to compensate for areas of weakness _____

j. Other (specify) _____

SECTION III. ISSUES AFFECTING JOB PERFORMANCE OF THE MSN AND GP

For each of the following issues affecting job performance, please rate the MSN and the GP on the frequency with which the problem arises:

1 = OFTEN a problem
2 = SOMETIMES a problem
3 = RARELY a problem
4 = NEVER a problem
5 = Not applicable

PROBLEMS	MSN	GP
a. Absence from work		
b. Tardiness		
c. Lack of preparation for assigned tasks		
d. Lack of initiative in doing job tasks		
e. Inadequate socializing with other staff: withdrawal		
f. Excessive socializing to detriment of job		
g. Distractibility		
h. Low frustration tolerance: impatience		
i. Memory problems		
j. Inability to transfer learning from one situation to another similar one		
k. Repetition of behaviors and verbalizations		
l. Inability to follow directions		
m. Poor judgment in relation to health and safety issues for themselves		
n. Poor judgment in relation to health and safety issues for people with whom they work		
o. Impulsiveness		
p. Inappropriate limit setting with children or clients (too lenient)		
q. Inappropriate limit setting with children or clients (too punitive)		
r. Insecurity about their role		
s. Low self-esteem		
t. Inflexibility in making changes (schedule, tasks)		
u. Inability to accept constructive criticism or re-direction		
v. Reluctance to ask for help when needed		
w. Physical complaints		
x. Personal problems interfere with work		
y. Grooming and hygiene issues		
z. Other (specify)		

SECTION IV. TECHNIQUES WHICH ONS MIGHT USE WITH EITHER MSN OR GP

All of you in this study have supervised the MSN. Many of you have also worked with the GP. The following is a list of supervisory techniques. Please check the box indicating the frequency with which you might use each technique for each population.

1 = Almost always
2 = Occasionally
3 = Seldom or never

SUPERVISORY TECHNIQUES	MSN	GP
a. Define job tasks in writing		
b. Give step by step instructions		
c. Modify assigned tasks (limit number)		
d. Use check list for follow through on tasks		
e. Remind verbally to do or complete task		
f. Provide concrete demonstration of tasks		
g. Give immediate feedback on job performance		
h. Point out inappropriate social behaviors and suggest ways to modify them		
i. Conduct regularly scheduled supervisory sessions		
j. Set limits for inappropriate behavior		
k. Take interest in their personal life		
l. Be realistic with them about their strengths and weaknesses		
m. Help them to accept constructive criticism		
n. Be flexible with regard to expectations		
o. Clarify their role as service provider rather than service recipient		
p. Encourage them to ask questions and otherwise advocate for themselves		
q. Include them in meetings and other functions of the organization		
r. Other (specify)		

SECTION V. OPEN - ENDED QUESTIONS

A. In what way do you do things differently with the MSN than you do with the GP?

_____

_____

_____

B. What has been most helpful to you in your efforts to train or supervise the MSN?

_____

_____

_____

SECTION VI. BACKGROUND INFORMATION

For statistical reasons, please fill out the following background information:

1. Your professional discipline: _____

2. Number of years in the field: _____

3. Organization in which you supervised MSN. (Check one):

Day care center	_____
Nursing home	_____
Geriatric day center	_____
Institution for retard	_____
Sheltered workshop	_____
Special needs school	_____
Retail business	_____
Bank	_____
Other	_____

4. How many different MSN have you supervised? _____

5. How many different GP have you supervised? _____

(SECTION VI continues)

SECTION VI continued

6. Total amount of time you have worked with MSN in current or former jobs. (Check one):

3 - 6 months	_____
7 -12 months	_____
13-18 months	_____
19-24 months	_____
25-36 months	_____
More than 36 months	_____

7. How often did you meet formally for supervision with MSN?

Once a week	_____
Once every two weeks	_____
Once a month	_____
Other (specify)	_____

8. What is the highest level of education you have had?

High school graduate	_____
Some courses after high school	_____
AA Degree (specify field)	_____
BA Degree (specify field)	_____
Master's Degree (specify field)	_____
Doctorate (specify field)	_____

9. Gender

Male	_____
Female	_____

10. Age

20 - 25	_____
26 - 30	_____
31 - 40	_____
41 - 50	_____
Over 50	_____

Thank you for your cooperation in completing this survey. Please put the completed questionnaire in the stamped self-addressed envelope and mail by January 22, 1990.

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SECTION III. ISSUES AFFECTING JOB PERFORMANCE OF THE MODERATE SPECIAL NEEDS (MSN) AND GENERAL POPULATION (GP)

\+ Tabulated for responses indicating that the issue "often" or "sometimes" affected job performance

Rank for MSN	Rank for GP	PROBLEMS	Percentages MSN (n=65)	GP (n=44)
1	10	Insecurity about their role	70.3	34.9
2	16	Low self-esteem	64.1	23.3
3	19	Memory problems	61.9	18.2
4	17	Distractibility	60.9	22.7
5	22	Inability to transfer learning from one situation to another similar one	58.5	13.6
6	2	Lack of initiative in doing job tasks	56.3	52.3
7	4	Lack of preparation for assigned tasks	55.7	47.6
8	18	Inability to follow directions	53.1	18.6
9	3	Inappropriate limit setting with children or clients (too lenient)	52.5	47.6
10	9	Reluctance to ask for help when needed	52.3	36.4
11	1	Inability to accept constructive criticism or re-direction	40.6	52.3
12	24	Repetition of behaviors and verbalizations	39.1	7.0
13	12	Excessive socializing to detriment of job	38.1	31.8
14	8	Personal problems interfere with work	35.4	36.4
15	6	Inappropriate limit setting with children or clients (too punitive)	34.4	39.0
16	7	Inflexibility in making changes (schedule, tasks)	34.4	36.4
17	15	Inadequate socializing with other staff: withdrawal	32.3	25.6
18	13	Low frustration tolerance: impatience	32.3	29.5
19	23	Impulsiveness	29.7	11.6
20	21	Poor judgment in relation to health and safety issues for themselves	29.7	14.0
21	20	Poor judgment in relation to health and safety issues for people with whom they work	27.0	14.0
22	14	Physical complaints	21.9	26.2
23	11	Absence from work	21.5	34.1
24	5	Tardiness	12.3	43.2
25	25	Grooming and hygiene issues	10.8	2.3

SECTION IV. TECHNIQUES WHICH ON-SITE SUPERVISOR (ONS) MIGHT USE WITH EITHER MODERATE SPECIAL NEEDS (MSN) OR GENERAL POPULATION (GP)

\+ Tabulated for responses indicating technique was "almost always" used

Rank for MSN	Rank for GP	TECHNIQUES WHICH ONS MIGHT USE WITH EITHER MSN OR GP	Percentages MSN (n=65)	GP (n=44)
1	6	Conduct regularly scheduled supervisory sessions	87.3	63.6
2	5	Be flexible with regard to expectations	84.1	64.3
3	1	Be realistic with them about their strengths and weaknesses	83.1	81.8
4	7	Give immediate feedback on job performance	81.5	45.5
5	4	Encourage them to ask questions and otherwise advocate for themselves	81.5	65.9
6	3	Help them to accept constructive criticism	70.3	72.7
7	15	Give step by step instructions	69.2	20.5
8	12	Provide concrete demonstration of tasks	64.6	27.3
9	2	Include them in meetings and other functions of the organization	60.3	79.1
10	17	Modify assigned tasks (limit number)	60.0	9.1
11	8	Define job tasks in writing	60.0	45.5
12	14	Remind verbally to do or complete task	51.6	22.7
13	13	Clarify their role as service provider rather than service recipient	51.6	25.6
14	9	Set limits for inappropriate behavior	48.4	43.2
15	11	Point out inappropriate social behaviors and suggest ways to modify them	34.4	27.9
16	10	Take interest in their personal life	33.8	38.6
17	16	Use check list for follow through on tasks	27.7	11.4

SECTION I-B: TECHNIQUES WHICH SUPPORT ON-SITE SUPERVISOR (ONS)

+ Tabulated for responses indicating the technique was "very helpful"

+ Responses refer to techniques that a Training Supervisor (TS) might provide to the ONS

Rank	TECHNIQUES WHICH SUPPORT THE ON-SITE SUPERVISOR (ONS)	Percentages
1	Meets with you and the MSN for joint discussions	79.2
2	Establishes a supportive relationship with you	77.2
3	Confers with you alone about the MSN	76.0
4	Clarifies your role in relation to the MSN	75.5
5	Identifies the special needs of the MSN	70.7
6	Explains strengths and weaknesses of MSN	70.2
7	Gives acknowledgment and encouragement for the job you are doing with the MSN	69.1
8	Expresses empathy for problems related to working with the particular MSN	66.0
9	Suggests specific techniques on how to help the MSN (i.e. making check lists)	64.8
10	Offers in-service workshops relevant to the MSN population	64.3
11	Demonstrates ways of problem solving work related issues with the MSN (in your presence)	58.8
12	Helps establish goals for vocational growth of MSN, both long and short term	54.9
13	Assigns tasks for the MSN to do	54.5

SECTION II: FACTORS INFLUENCING QUALITY OF SUPPORT TO PERSON WITH MODERATE SPECIAL NEEDS (MSN)

\+ Tabulated for responses indicating the factor made the respondent "much more" supportive to the MSN

RANK	FACTORS INFLUENCING QUALITY OF SUPPORT TO PERSON WITH MSN	Percentages
1	Being given concrete ways to help MSN to compensate for areas of weakness	80.0
2	My belief in the overall concept of training and employing the MSN	71.2
3	My confidence in my overall supervisory ability	70.5
4	Understanding the special needs of MSN	68.3
5	My feeling that I am basically successful in helping MSN work to the best of his/her ability	59.7
6	Good quality of performance by MSN	57.6
7	Advocacy for the needs of the MSN by TS or Work Supervisor (WS)	45.1
8	Having supervisor model supportive behavior onsite with the MSN	42.2
9	Recognition of my work with the MSN by TS or WS	39.3

RESPONSES TO OPEN ENDED QUESTIONS

Section V Open Ended Questions:

A. In what way do you do things differently with the MSN than you do with the GP?

Common Themes	# of people*
Give more specific explanations about tasks, routines, and rules	17
Modify tasks assigned; lower expectations for MSN	11
Devote more time to supervision of the MSN	11
Give more feedback to MSN; follow up more closely with MSN	6
Offer MSN more structure	6
Exercise more patience and work harder with MSN	4

B. What has been the most helpful to you in your efforts to train or supervise the MSN?

Common Themes	# of people*
Support and availability of training supervisor; individual consultations with training supervisor; in service workshops	31
Written expectations and assignments for the MSN from the training program	10
Knowing MSN's learning disabilities and adjusting to them	10
Relationship with the MSN	6
Attitude and progress of the MSN	4
Weekly supervisory meetings with MSN	4
Previous experience working with and/or supervising MSN	2

* Some respondents did not fill in this question. Others responded with several of the themes.

BACKGROUND INFORMATION ABOUT THE RESPONDENTS TO THE QUESTIONNAIRE

N-65

1. Gender: Female 88%
   Male 12

2. Age:
20-25	6%
26-30	31
31-40	28
41-50	25
Over 50	11

3. Education:
High school graduates	3%
Some courses after high school	6
AA degree	8
BA degree	51
Master's degree	32

4. Academic Specialization:
Early Childhood Education or Development	55%
Day Care Management	2
Human Service Rehabilitation	9
Social Work	5
Business	2
Other	8
None specified	20

5. Current Professional Discipline:
Early Childhood Administration	29%
Early Childhood Teacher	43
Adult Human Service Administration	5
Adult Human Services/Direct Service Provider	12
Special Needs Educator	2
Other	6
No answer	3

6. Years in the professional field:
   Range: 2-25 years
   Average number of years: 11

7. Organization in which MSN was supervised:
Day Care Center or Pre-school	72%
Adult Human Service Setting	19
Special Needs Program	5
Retail	4

8. Number of students/trainees supervised Over the course of time:
	MSN	GP
Range	1-12*	0-hundreds
Average	3	12

* One respondent wrote "countless" (not averaged in)

PEOPLE INTERVIEWED

1. Larry Shulkin, Co-owner, Allen Pen Company
2. Al Davis, Vice-President, Chief Financial Officer, Nova Bio-Medical
3. Mary Ann Rapoza, Site Supervisor, Supported Employment for Persons with Mental Retardation, Nova Bio-Medical
4. Barbara Sylvia, Site Supervisor, Supported Employment for Persons with Mental Retardation, Newton Marriott
5. Members of the Personnel Department, (group interview), Newton Marriott
6. Elaine Tocci, Employment Manager, BU Bookstore
7. Bea Riley, Affirmative Action Recruiting Manager, Harvard Community Health Plan
8. Alta La Point, Co-ordinator of Handicapped Services, Human Resource Department, University of MA Medical Center
9. Jim McCarthy, Recruiter, MIT
10. Caroline Satkwich, Supervisor, Bill Adjusting Department Lechmere
11. Edie Evans, Recruiting Co-ordinator, John Hancock Insurance
12. Les Hemings, Director of Human Resources, John Hancock Insurance
13. Marilyn Hayes, Assistant to General Manager, Customer Service Department, Filene's
14. Sheryl Dorsey, Word Processor II, Supervisor, MA State Department of Employment and Training
15. Vernell Price, Tax Enforcement Manager, MA State Department of Employment and Training
16. Jerry McDonnell, Director, Neville Manor Nursing Home
17. Diane Clark, Early Childhood Educator, Former on-site supervisor of Threshold Students
18. Chrissie Remington, Early Childhood Educator, Former on-site supervisor of Threshold students
19. Karen Muncaster, Director, Program for the Learning Disabled, Middlesex Community College

People Interviewed cont.

20. Laura Patey, Educational Consultant, Trantec Inc.

21. Marty Gold, Program Coordinator, Supported Work for Persons with Mental Retardation, Morgan Memorial Goodwill Industries, Inc.

22. Anne Chace, Regional Coordinator, MA Project with Industry

23. James Fratolillo, Supervisor, Office of Employment Services, MA Rehabilitation Commission

24. Joy McMahon, Project Coodinator, Regional Technical Assistance Project, Office of Employment Services, MA Rehabilitation Commission

25. Ilene Asarch, Program Coordinator, Work Supervisor for Persons with Mental Retardation, Jewish Vocational Services

26. Anthony Voto, Supervisor, Mail Services, Suffolk University

27. James Hardeman, Manager, Counseling Department, Polaroid Corporation

CONSULTANTS

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Fran Osten, Training Supervisor, Early Childhood, Threshold Program

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